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April 4, 2006

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"Express Mail" mailing number EV 733194555 US

Date of Deposit April 4, 2006

I hereby certify that this correspondence is being deposited with the United States Postal Service "Express Mail to Addressee" service under 37 C.F.R. 1.10 on the date indicated above and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.


Angela L. Boyd

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Re: U.S. Patent Application Serial No. 09/996,695 for
DEPOSITION METHOD FOR NANOSTRUCTURE
MATERIALS
Our Ref. No. 421/170/8

Sir:

Please find enclosed the following:

1. Request for Continued Examination (RCE) Transmittal (Form PTO/SB/30, 1 page);
2. Amendment (38 pages);
3. Fee Transmittal (Form PTO/SB/17, 1 page) in duplicate;
4. A check in the amount of \$2,055.00 for the fee due;
5. A return-receipt postcard to be returned to our offices with the U.S. Patent and Trademark date stamp thereon; and
6. A Certificate of Express Mail No.: EV 733194555 US.

Please contact our offices if there are any questions with respect to this matter.

tel 919.493.8000
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Commissioner for Patents
April 4, 2006
Page 2

The Commissioner is authorized to charge any deficiencies of payment associated with the filing of this correspondence to Deposit Account No. 50-0426 to avoid the unintentional abandonment of the instant application.

Respectfully submitted,

JENKINS, WILSON, TAYLOR & HUNT, P.A.



Jeffrey L. Wilson
Registration No.: 36,058
Customer No: 25297

Enclosures

Effective on 12/08/2004.

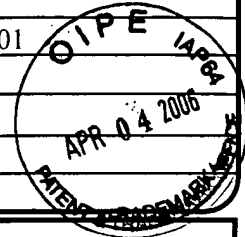
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL
For FY 2005☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 2,055.00

Complete if Known

| | |
|----------------------|-------------------|
| Application Number | 09/996,695 |
| Filing Date | November 30, 2001 |
| First Named Inventor | Otto Z. Zhou |
| Examiner Name | Mayekar, K. |
| Art Unit | 1753 |
| Attorney Docket No. | 421/170/8 |

**METHOD OF PAYMENT (check all that apply)**☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____☒ Deposit Account Deposit Account Number: 50-0426 Deposit Account Name: Jenkins, Wilson, Taylor & Hunt, P.A.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☐ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
| | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | 0.00 |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEES

| Fee Description | Fee (\$) | Small Entity Fee (\$) |
|----------------------------------------------------|----------|-----------------------|
| Each claim over 20 (including Reissues) | 50 | 25 |
| Each independent claim over 3 (including Reissues) | 200 | 100 |
| Multiple dependent claims | 360 | 180 |

Total Claims 73** Extra Claims 26 Fee (\$)25.00 Fee Paid (\$)650.00

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims 12** Extra Claims 5 Fee (\$)100.00 Fee Paid (\$)500.00

HP = highest number of independent claims paid for, if greater than 3.

Multiple Dependent Claims
Fee (\$)
Fee Paid (\$)

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets 38 - 100 = -62 / 50 = 1 (round up to a whole number) x Fee (\$)125.00 = Fee Paid (\$)0.00

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): RCE (\$395) and 3 mo. extension of time (\$510)

Fees Paid (\$)

905.00

SUBMITTED BY

| | | | | | |
|-------------------|--------------------------|-----------------------------------|----------------------|-----------|---------------------|
| Signature | <u>Jeffrey L. Wilson</u> | Registration No. (Attorney/Agent) | 36,058 | Telephone | <u>719 493 8000</u> |
| Name (Print/Type) | Jeffrey L. Wilson | Date | <u>April 4, 2006</u> | | |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.